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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/765,885

01/29/2004

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03500.017861.

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7590

03/10/2010

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EXAMINER

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ART UNIT

PAPER NUMBER

2625

MAIL DATE

DELIVERY MODE

03/10/2010

PAPER

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.

## DETAILED ACTION

### *Response to Applicant's Arguments*

1. **In response to** “none of the references, either taken singularly or in combination, disclose or suggest, simultaneously displaying the plurality of read image signals on one display screen of the monitor unit in the landscape placement and in a form of a thumbnail type display, as recited in Claim 1”.

***Robar*** discloses a single scanned image which includes images of four films 12 from one set of films (**Fig 6 and see Col 6, Rows 10-12**). Further, ***Robar*** suggested that measured density of at least each pixel comprising the single scanned image can then be converted to an integrated radiation dose to form an image of dosage distribution data (**Col 7, Rows 10-12**). Thereafter, the data is display on a suitable monitor as a DICOM image (**Col 7, Rows 53-67**). Thus, the DICOM image, when displayed, corresponds to simultaneously displaying four films in DICOM format (**Col 6, Rows 10-12 and Col 7, Rows 53-67, images comprising at least four films 12 is displayed as a single image in DICOM format on a suitable monitor**).

In view of the teachings of placing displayed images in landscape placement for the advantage of standardization for ease of operation by ***Yoshida*** and the need (**Because DICOM images are in series and thumbnail affords a doctor an advantage of having an overview of all images so as to expediently choose one to show in detail**) to display a series of DICOM images in thumbnail format suggest by ***Dow***, the combination of ***Robar***, ***Yoshida*** and ***Dow*** renders obvious the step of simultaneously displaying the plurality of read

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image signals on one display screen of the monitor unit in the landscape placement and in a form of a thumbnail type display.

2. **In response to** “Still further, in addition to the arguments set forth above, Applicant submits that the combination of Robar et al., Yoshida, and Dow et al. is improper” **and** “In fact, Robar et al. explicitly states that the processing of the digitized images should be done by computer so as to “be insensitive to human error which might result in one or more images being placed out of sequence or in the wrong orientation.” (column 3, lines 35-38). Accordingly, there is no need to display the digitized images to the user, because the computer automatically processes the images without user input”.

To the contrary, the result of “be insensitive to human error which might result in one or more images being placed out of sequence or in the wrong orientation” is achieved by accurately converting image pixel densities into dosage distribution data in DICOM format such that when loaded into memory, said DICOM image containing measured dose distribution may be translated, rotated, and scaled to spatially align with an intended dose distribution so that “any deviations of the actual distribution from intended dose distributions can thereby be identified before a radiosurgery treatment is delivered to a patient” (**Col 8, Rows 1-39**). Surely, one can not expect a doctor to deduce “any deviations of the actual distribution from intended dose distributions can thereby be identified before a radiosurgery treatment” if the measured dosage distribution is not properly aligned relative to intended dose distribution on a suitable monitor and hence “sensitive to human error” (**Col 7, Rows 53-55 and Col 8, Rows 36-39**).

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Further, given the advantage of displaying images in standardized landscape orientation (**as taught by *Yoshida***) and the fact that DICOM images are displayed in series (**Col 7, Row 61, *Robar***) motivates the need for display in thumbnail (**as taught by *Dow***), the combination of ***Robar***, ***Yoshida***, and ***Dow*** is indeed proper.

/Richard Z. Zhu/

Examiner, Art Unit 2625

/King Y. Poon/

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